FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL

OMB Number:

3235-0076

Expires:

Prefix

April 30, 2008

Estimated average burden hours per response

SEC USE ONLY

DATE RECEIVED

16.00

Name of Offering (check if this is an an	nendment and name h	as changed, and indic	cate change.)		
SingleTree Resources, Inc. Offering of SI Filing Under (Check box(es) that apply): Type of Filing:	nares of Common Ste ☐ Rule 504 ☐ Amendment	Rule 505	⊠ Rule 506	☐ Section 4(6)	多世のMail Processing Section
		BASIC IDENTIFICA	TION DATA		APR 15 2008
 Enter the information requested about the Name of Issuer (□ check if this is at 	e issuer namendment and nam	ne has changed, and in	ndicate change.)		N.N.
SingleTree Resources, Inc.		g,			Washington, DC
Address of Executive Offices 25528 Genesee Trail Road, Golden, Co	•	Number and Street, C	ty, State, Zip Code)	Telephone Number (Incl. (720) 274-4035	
Address of Principal Business Operations (if different from Executive Offices)		Number and Street, C	ity, State, Zip Code)	Telephone Number (Incl	uding Area Code)
Type of Business Organization corporation business trust Actual or Estimated Date of Incorporation of	☐ limited partners ☐ limited partners Mo	hip, to be formed	☐ Other (pleas	e specify) limited liability c	
Jurisdiction of Incorporation or Organizatio	n (Enter two-letter U.)	S. Postal Service abbi		☐ Estimated	PROCESSED APR 2 1 2008 THOMSON
GENERAL INSTRUCTIONS					FINANCIAL
Federal: Who Must File: All issuers making an offering of securide	s in reliance on an exemption	under Regulation D or Soct	ion 4(6), 17 CFR 230.501 at	seq. or 15 U.S.C. 77d(6).) - JOIAL
When To File: A notice must be filed no later than 15 days the SEC at the address given below or, if received at that a					
Where to File: U.S. Securities and Exchange Commission,	450 Fifth Street, N.W., Wash	hington, D.C. 20549.			
Copies Required: Five (5) copies of this notice must be file	d with the SEC, one of which	n must be manually signed.	Any copies not manually sign	ned must be photocopies of the manu	ally signed copy or bear typed or printed signature
Information Required: A new filing must contain all information previously supplied in Parts A and B. Part			e of the issuer and offering.	any changes thereto, the information	requested in Part C, and any material changes fro

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state faw. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the

SEC 1972 (5-05)

filing of a federal notice.

Filing Fee: There is no federal filing fee.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely,

A BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- · Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
ull Name (Last name first, if	individual)				IAIGHGEHIEL TAIHICE
leff Doud, Marilee					
Business or Residence Addres	s (Number and Stre	et, City, State, Zip Code)			
25528 Genesee Trail Road, (_ ′	•	IVI Constitut Office	(VI Diseases	Committee diameter
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Weils, John M.					
Business or Residence Addres	s (Number and Stre	et, City, State, Zip Code)			
25528 Genesee Trail Road, (Theak Boyles) that Apply:		0401Beneficial Owner	⊠ Executive Officer	☑ Director	☐ General and/or
Check Box(cs) that Apply:	☐ Promoter	Li Beneficial Owner	ISJ EXECUTIVE OFFICER	E Director	Managing Partner
ull Name (Last name first, if	individual)				
Dargan, Charles K. II		<u>, </u>			
Business or Residence Addres	s (Number and Stre	eet, City, State, Zip Code)			
25528 Genesee Trail Road, (Golden, Colorado 8	0401			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
Full Name (Last name first, if	individual)		····		Managing Partner
	•				
Edwards, Charles N. Business or Residence Addres	c (Number and Co.	net City State 7in Code			
Pasiness of Residence Address	JUG DIEB ISOURIUFIJ E	wi, City, June, Alp Couc)			
25528 Genesee Trail Road, (Golden, Colorado 8	0401			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)		· · · · · · · · · · · · · · · · · · ·		Managing railid
	•				
Neff, Tom Business or Residence Addres	o (Mumbo- and St	est City State 7in Code			· · · · · · · · · · · · · · · · · · ·
DUSHNESS OF KESIGENCE AGGRES	s (Number and Stre	cci, City, State, Alp Code)			
25528 Genesee Trail Road, (Golden, Colorado 8	0401			
Check Box(cs) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	General and/or
Full Name (Last name first, if	individual)				Managing Partner
	•				
Markve, Tony Business or Residence Addres	c (Number and Stee	eet City State Zin Code)			
DESIRES OF LOSHICIECE MODICS	o (munici ana one	ici, City, Gaic, Zip Couc)			
25528 Genesee Trail Road, (Golden, Colorado 8			.	
Check Box(es) that Apply:	☐ Promoter	🗵 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				Managing Partner
Dand Oil & Cas Campra					
Doud Oil & Gas Company Business or Residence Addres	s (Number and Stre	ect, City, State, Zip Code)			
25578 Coneres Trail Dond 4	Colden Colorado 9	t h 401			
25528 Genesee Trail Road, (Check Box(es) that Apply:	Folden, Colorado a	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
ones overles, marrisphi,	<u> </u>				Managing Partner
	individual)				
Full Name (Last name first, if	,				
Full Name (Last name first, if					

			in Company	. В.	INFORMA	TION ABOU	UT OFFERI	NG 🖓 📲 🚉	The state of the		Fig. Phys.	34 多型
1 Uac	the issuer sold,	or does the	iccuer inten	d to sell to	non-accredi	ted investor	e in this offe	ring?			Yes	No
i. nas	uie issuei soiu,	or does the			ppendix, Co				,	***************************************	_	_
2. Wha	at is the minimu	ım investme					-				\$	
										Yes	No	
	Does the offering permit joint ownership of a single unit? Enter the information required for each person who has been or will be paid or given, directly or indirectly, any commission									🛮		
or s liste of th	er the information imilar remuners and is an associate to broker or destort the inform	ation for sol ed person o aler. If mor	icitation of r agent of a e than five (purchasers i broker or de 5) persons	in connection caler register to be listed	n with sales red with the	of securitie SEC and/or	s in the offer with a state	ring. If a p or states, li	erson to be st the name		
Fuil Nam	e (Last name firs	t, if individus	d)									
<u>purchase</u> Business	ic Summit Securers in connection or Residence Add	with the sal dress (Number	e of securitie	s in this offe	ring ***	en, directly	or indirectly	, апу сотт	ission or sir	milar remunei	ration for	solicitation of
	Which Person Lis										·····	
•	"All States" or ch									fCA1		All States
[AL] [IL] [MT] [RI]	[IN] [NE]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	or Residence Ad			City, State, Z	ip Code)							
Name of	Associated Broke	er or Dealer										
States in	Which Person Li	sted Has Soli	cited or Intend	Is to Solicit F	urchasers					 -		
(Check	"All States" or cl	heck individu	al States)									🗆 All States
[AL] [IL] [MT] [RI]	[IN] (NE)	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	(DE) (MD) (NC) (VA)	[DC] [MA] [ND] [WA]	[FL] [M]] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nam	ne (Last name firs	t, if individus	il)									
Business	or Residence Ad	dress (Numbe	er and Street,	City, State, Z	ip Code)							
Name of	Associated Broke	er or Dealer										
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this bound and indicate in the columns below the amounts of the securities offered for exchange and alread exchanged.	х				
	Type of Security	(Aggregate Offering Price		Amo	unt Already Sold
	Debt	\$	0.00	s		0.00
	Equity	\$	10,000,000.00	S		3,239,240.00
	☑ Common ☐ Preferred		1010001000100	Ψ		<u>. • 14•3 p. 1010 v</u>
		•	0.00	s		0.00
	Convertible Securities (including Warrants) Partnership Interests		0.00	5		0.00
	•	•	· · · · · · -	3		0,00
	Other (Specify)	3	0.00	3		
	Total	s	10.000.000.00	3		3,239,240.00
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in th offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the securities are considered as a securities of their purchases.	te				
	the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."		Numb Investo	-	Do	Aggregate Ilar Amount 'Purchases
	Accredited Investors			_	2	<u>3,239,240.00</u>
	Non-accredited Investors		<u> </u>	_	\$	0.00
	Total (for filings under Rule 504 only)		<u>N/A</u>		S	N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				~	
	Type of offering		Type of Security		DO	llar Amount Sold
	Rule 505		0.00		\$	0.00
	Regulation A.		0.00	_	•	0.00
	Rule 504		0.00	_	*	0.00
	Total		0,00	_	 s	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not successful to the information of the information may be given as subject to future contingencies.	es ne	V.40		4	*****
	known, furnish an estimate and check the box to the left of the estimate.					0.40
	Transfer Agent's Fees				\$_	0.00
	Printing and Engraving Costs				\$_	0.00
	Legal Fees			X	-	0.000.00
	Accounting Fees			X	\$_	10,000.00
	Engineering Fees				\$_	0.00
	Sales Commissions (specify finders' fees separately)			X	\$_	0.00
	Other Expenses (identify)		•••••		\$_	0.00
	Total		•••••	X	\$_	50,000.00

C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES A	ND U	SE OF P	ROCEEDS		, -,	
b. Enter the difference between the aggregate off Question 1 and total expenses furnished in response the "adjusted gross proceeds to the issuer."	to Part C - Question 4.a. This	differe	ence is			\$;	9.950 <u>.000.00</u>
5. Indicate below the amount of the adjusted gross pro used for each of the purposes shown. If the amount estimate and check the box to the left of the estimate, the adjusted gross proceeds to the issuer set forth in re	for any purpose is not known The total of the payments listed	ı, furn d musi	ish an equal				
			D	lyments to Officers, irectors & Affiliates			Payments to Others
Salaries and Fees	***************************************		S	0.00		S	0,00
Purchase of real estate			\$	0.00		S	0.00
Purchase, rental or leasing and installation of machinery	• •		s	0.00		S	0.00
Construction or lease of plant buildings and facilities			\$	0.00		\$	0.00_
Acquisition of other businesses (including the value of soffering that may be used in exchange for the assets or sissuer pursuant to a merger)	ecurities of another		s	0.00		s	0.00
Repayment of indebtedness			\$	0.00	_	s	0.00
Working capital			S	0.00	×	s	9,950,000,00
Other (specify)Engineering and Water Procurement Cos						_	
			s	0.00		s _	0.00
Column Totals			\$	0.00	×	s _	9,950,000.00
Total Payments Listed (column totals added)	•••••••••••••••••••••••••••••••••••••••			⊠ \$	9,950,0	00.00	_
D.	FEDERAL SIGNATURE	13 y 24.	φ. (1)	NATES	4 4374 4 E		
The issuer has duly caused this notice to be signed by the unde signature constitutes an undertaking by the issuer to furnish to information furnished by the issuer to any non-accredited investor	the U.S. Securities and Excha	nge C	ommiss	ice is filed un	nder Ru ritten re	ile 5(eques	05, the following t of its staff, the
Issuer (Print or Type)	Signature	111				Date	 -
SingleTree Resources, Inc.	Signature ###				1 7		8,2008
Name of Signer (Print or Type)	Title of Signer (Print or Ty	pc)				,	
John M. Wells	President						
	.1						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

